2. HHS Acquisition Regulations HHSAR Part 370 Special Programs Affecting Acquisition—0990–0129—Extension—HHSAR Part 370 establishes requirements for the accessibility of meetings, conferences, and seminars to persons with disabilities; establishes requirements for Indian preference in employment, training and subcontracting opportunities.

Respondents: State or local governments, Businesses or other for-profit, non-profit institutions, Small businesses; Burden Information about Accessibility of Meetings—*Annual Number of Respondents:* 335; *Annual Frequency of Response:* one time; *Average Burden per Response:* 10 hours; *Total Annual Burden:* 3,350 hours—Burden Information about Indian Preference—*Annual Number of Respondents:* 932; *Annual Frequency of Response:* One time; *Average Burden per Response:* 8 hours; *Total Annual Burden:* 7,456 hours—*Total Burden:* 10,806 hours.

OMB Desk Officer: Allison Eydt.

Copies of the information collection packages listed above can be obtained by calling the OS Reports Clearance Officer on (202) 690–6207. Written comments and recommendations for the proposed information collection should be sent directly to the OMB desk officer designated above at the following address: Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, 725 17th Street N.W., Washington, D.C. 20503.

Comments may also be sent to Cynthia Agens Bauer, OS Reports Clearance Officer, Room 503H, Humphrey Building, 200 Independence Avenue S.W., Washington, DC, 20201. Written comments should be received within 30 days of this notice.

Dated: November 5, 1996.

Dennis P. Williams,

Deputy Assistant Secretary, Budget.

[FR Doc. 96–29538 Filed 11–18–96; 8:45 am]

BILLING CODE 4150–04–M

Substance Abuse and Mental Health Services Administration

Delegation of Authority

Notice is hereby given that I have delegated to the Administrator, Substance Abuse and Mental Health Services Administration, with authority to redelegate, all the authorities vested in the Secretary of Health and Human Services under the Saint Elizabeths Hospital and District of Columbia Mental Health Services Act, PL 98–621, 98 Stat. 3369, as amended, concerning the mental health services delivery system of the District of Columbia, excluding the authority under Section 4(d)(2) to establish a Labor Management Advisory Committee.

This delegation supersedes the May 13, 1985 delegation of authority from the Secretary to the Assistant Secretary for Health, entitled ''Delegation of Authority Under the Saint Elizabeths Hospital and District of Columbia Mental Health Service Act, Public Law 98–621.''

This delegation is effective upon date of signature.

Dated: November 5, 1996.

Donna E. Shalala,

Secretary.

[FR Doc. 96–29539 Filed 11–18–96; 8:45 am]

BILLING CODE 4160–15–M

Office of the Secretary

Findings of Scientific Misconduct

AGENCY: Office of the Secretary, HHS.

ACTION: Notice.

SUMMARY: Notice is hereby given that the Office of Research Integrity (ORI) has made a final finding of scientific misconduct in the following case:

Eric Whitters, Ph.D., University of Oregon: Based upon an investigation conducted by the University of Oregon as well as Dr. Whitters' own admission, ORI found that Eric Whitters, Ph.D., former postdoctoral fellow, Institute of Molecular Biology at the University of Oregon, engaged in scientific misconduct by fabricating experimental results that involved the selective growth of yeast strains that he represented as having temperature-sensitive phenotypes. The research was supported in part by a grant from the National Institute of General Medical Sciences (NIGMS), National Institutes of Health (NIH).

Dr. Whitters has accepted the ORI finding and has entered into a Voluntary Exclusion Agreement with ORI in which he has voluntarily agreed, for the three (3) year period beginning November 6, 1996, to exclude himself from:

(1) any contracting or subcontracting with any agency of the United States Government and from eligibility for, or involvement in, nonprocurement transactions (e.g., grants and cooperative agreements) of the United States Government as defined in 45 CFR Part 76 (Debarment Regulations), and

(2) serving in any advisory capacity to the Public Health Service (PHS), including but not limited to service on any PHS advisory committee, board, and/or peer review committee, or as a consultant.

The research at issue did not affect any published research and was not included in any grant application.

FOR FURTHER INFORMATION CONTACT: Acting Director, Division of Research Investigations, Office of Research Integrity, 5515 Security Lane, Suite 700, Rockville, MD 20852, (301) 443–5330.

Chris B. Pascal,

Acting Director, Office of Research Integrity.

[FR Doc. 96–29583 Filed 11–18–96; 8:45 am]

BILLING CODE 4160–17–P

Agency for Health Care Policy and Research

Notice of Health Care Policy and Research Special Emphasis Panel Meeting

In accordance with section 10(a) of the Federal Advisory Committee Act (5 U.S.C., Appendix 2) announcement is made of the following special emphasis panel scheduled to meet during the month of November 1996:

Name: Health Care Policy and Research Special Emphasis Panel

Date and Time: November 21, 1996, 2:00 p.m.

Place: Agency for Health Care Policy and Research, 2101 E. Jefferson Street, Suite 400, Rockville, MD 20852.

Open November 21, 1996, 2:00 p.m. to 2:15 p.m.

Closed for remainder of meeting.

Purpose: This Panel is charged with conducting the initial review of grant applications proposing medical effectiveness research. The three main areas of emphasis are: (1) determining what clinical interventions are most effective, cost effective, and appropriate; (2) methods and data to advance effectiveness research; and (3) dissemination and evaluation of the impact of research findings on clinical practice and outcomes.

Agenda: The open session of the meeting on November 21, from 2:00 p.m. to 2:15 p.m., will be devoted to a business meeting covering administrative matters. During the closed session, the committee will be reviewing and discussing grant applications dealing with health services research issues. In accordance with the Federal Advisory Committee Act, section 10(d) of 5 U.S.C., Appendix 2 and 5 U.S.C., 552b(c)(6), the Administrator, AHCPR, has made a formal determination that this latter session will be closed because the discussions are likely to reveal personal information concerning individuals associated with the grant applications. This information is exempt from mandatory disclosure.

Anyone wishing to obtain a roster of members of other relevant information should contact Carmen Johnson, Agency for Health Care Policy and Research, Suite 400, 2101 East Jefferson Street, Rockville, Maryland 20852, Telephone (301) 594–1449

x1613. Agenda items for this meeting are subject to change as priorities dictate.

Note: Due to scheduling problems, notification of this meeting was delayed.

Dated: November 13, 1996.

Clifton R. Gaus,

Administrator.

[FR Doc. 96–29536 Filed 11–18–96; 8:45 am]

BILLING CODE 4160–90–M

Centers for Disease Control and Prevention

Fees for Sanitation Inspections of Cruise Ships

AGENCY: Centers for Disease Control and Prevention (CDC), Department of Health and Human Services.

ACTION: Notice.

SUMMARY: This notice announces fees for vessel sanitation inspections, effective January 1, 1997.

EFFECTIVE DATE: January 1, 1997.

FOR FURTHER INFORMATION CONTACT: Daniel M. Harper, Program Manager, Vessel Sanitation Program, Special Programs Group, National Center for Environmental Health, Centers for Disease Control and Prevention, 4770 Buford Highway, NE., Mailstop F–29, Atlanta, Georgia 30341–3724, telephone (770) 488–3524.

SUPPLEMENTARY INFORMATION:

Purpose and Background

The fee schedule for sanitation inspections of passenger cruise ships currently inspected under the Vessel Sanitation Program (VSP) was first published in the Federal Register on November 24, 1987 (52 FR 45019), and CDC began collecting fees on March 1, 1988. Since then, CDC has published the fee schedule annually. This notice announces fees effective January 1, 1997. The formula used to determine the fees is as follows:

$$\text{Average cost per inspection} = \frac{\text{Total Cost of VSP}}{\text{Weighted No. of Annual Inspections}}$$

The average cost per inspection is multiplied by a size/cost factor to determine the fee for vessels in each size category. The size/cost factor was established in the proposed fee schedule published in the Federal Register on July 17, 1987 (52 FR 27060), and revised in a schedule published in the Federal Register on November 28, 1989 (54 FR 48942). The revised size/cost factor is presented in Appendix A.

Fee

The fee schedule is presented in Appendix A and will be effective January 1, 1997, through December 31, 1997. However, should a substantial increase occur in the cost of air transportation, it may be necessary to readjust the fees before December 31, 1997, since travel constitutes a sizable portion of the costs of this program. If such a readjustment in the fee schedule is necessary, a notice will be published in the Federal Register 30 days before the effective date.

Applicability

The fees will be applicable to all passenger cruise vessels for which sanitation inspections are conducted as part of CDC's Vessel Sanitation Program.

Dated: November 13, 1996.

Joseph R. Carter,

Acting Associate Director for Management and Operations, Centers for Disease Control and Prevention (CDC).

Appendix A

SIZE/COST FACTOR

Vessel size	GRT [1]	Average cost X
Extra Small	(<3,001)	0.25
Small	(3,001–15,000)	0.5
Medium	(15,001–30,000)	1.0
Large	(30,001–60,000)	1.5
Extra Large ...	>60,000)	2.0

[1] GRT-Gross Register Tonnage in cubic feet, as shown in Lloyd's Register of Shipping.

FEE SCHEDULE JANUARY 1, 1997—DECEMBER 31, 1997

Vessel size	GRT [1]	Fee
Extra Small	(<3,001)	$1,024
Small	(3,001–15,000)	2,048
Medium	(15,001–30,000)	4,095
Large	(30,001–60,000)	6,143
Extra Large	>60,000)	8,191

Inspections and reinspections involve the same procedure, require the same amount of time, and will, therefore, be charged at the same rate.

[1] GRT-Gross Register Tonnage in cubic feet, as shown in Lloyd's Register of Shipping.

[FR Doc. 96–29525 Filed 11–18–96; 8:45 am]

BILLING CODE 4163–18–P

Food and Drug Administration

Medical Gas Industry; Notice of Public Workshop

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice of public workshop.

SUMMARY: The Food and Drug Administration (FDA) is announcing a public workshop to discuss current good manufacturing practices (CGMP's) regulations for firms that transfill or repack medical gases (medical gas manufacturers). The purpose of the workshop, sponsored by FDA's Cincinnati District Office, is to provide an overview on CGMP requirements and to discuss significant problems encountered in the medical gas industry.

DATES: The public workshop will be held on Wednesday, December 4, 1996, 9 a.m. to 5 p.m. Preregistration is recommended because seating is limited to 100 registrants. Registration is requested by November 27, 1996.

ADDRESSES: The public workshop will be held at the Cincinnati Bell Long Distance Bldg., 36 East 7th St., rms. 1703 and 1704, Cincinnati, OH.

FOR FURTHER INFORMATION CONTACT: Evelyn D. Forney, Cincinnati District Office, Food and Drug Administration, 1141 Central Pkwy., Cincinnati, OH 45202, 513–684–3501, ext. 163.

SUPPLEMENTARY INFORMATION: The purpose of this workshop is to provide a comprehensive review of the CGMP regulations as they relate to the medical gas industry as observed by FDA, States, and medical gas trade organizations.